# **Quarterly Totals**

# **Demographic Reporting Form**

**Positive Alternatives** 

Date: <u>April 1-June 19, 2016</u>

<u>Lake Minnetonka Life-Care Center</u> /Southwest Options for Women Centers

### 1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
0	0	1	3	8	6	1	0

## 2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post- partum	Pregnancy Status Unknown
5	5	3	6	0

#### 3. Client Marital Status:

Married	Not Married	Marital Status Unknown
7	12	0

#### 4. Client Race:

Race: White	Race: African- American	Race: African- African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race	Race: Unknown
10	3	5	1	0	0	

# 5. Client Ethnicity:

Hispanic Ethnicity: Yes	Hispanic Ethnicity: No	Ethnicity: Unknown	
4	15		

#### INSTRUCTIONS FOR COMPLETING DEMOGRAPHIC REPORTING FORM

- **1.** Enter the date covered by the reporting period. The date will correspond to the quarterly report (e.g., January March, 2014).
- **2.** Enter your organization name.
- 3. Using the Individual Demographic forms collected during the reporting period, enter the totals for each of the demographic categories in numbers 1-5.
- **4.** Save the form as a new document. Send it in by email with your Update Report of the same quarter. Reports are due the 20<sup>th</sup> of the month after the end of a quarter.
- **5.** Reuse the form each quarter.